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# STATE OF SOUTH DAKOTA
# Statement of Legal Newspaper Ownership and Circulation

| | | |
|---|---|---|
| 1. TITLE OF NEWSPAPER: BISON COURIER | | 2. DATE: 09/26/2023 |
| 3. FREQUENCY OF ISSUE: WEEKLY | 3A. NO. OF ISSUES PUBLISHED ANNUALLY: 52 | 3B. ANNUAL SUBSCRIPTION PRICE: $45 in area/$50 out |

4. COMPLETE MAILING ADDRESS OF KNOWN OFFICE OF PUBLICATION (Street, City, County, State and ZIP+4 Code) (Not printers)
PO BOX 429; BISON, PERKINS, SD 57620-0429

5. COMPLETE MAILING ADDRESS OF THE HEADQUARTERS OR GENERAL BUSINESS OFFICES OF THE PUBLISHER (Not printers)
RAVELLETTE PUBLICATIONS, INC; PO BOX 788; PHILIP, SD 57567

6. FULL NAME OF PUBLISHER: DONALD J RAVELLETTE

7. OWNER (If owned by a corporation, its name and address must be stated and list on the back of this form the names and addresses of stockholders owning or holding 1 percent or more of total amount of stock. If not owned by a corporation, the names and addresses of the individual owners must be given. If owned by a partnership or other unincorporated firm, its name and address, as well as that of each individual must be given.

| FULL NAME | COMPLETE MAILING ADDRESS |
|---|---|
| DONALD J RAVELLETTE (100%) | PO BOX 633; PHILIP, SD 57567 |

8. KNOWN BONDHOLDERS, MORTGAGES, AND OTHER SECURITY HOLDERS OWNING OR HOLDING 1 PERCENT OR MORE OF TOTAL AMOUNT OF BONDS, MORTGAGES OR OTHER SECURITIES (If there are none, so state. If more space is needed, list on back of this form.
NONE

| 9. EXTENT AND NATURE OF CIRCULATION | AVERAGE NO. COPIES EACH ISSUED PRECEDING 12 MONTHS | ACTUAL NO. COPIES ISSUED NEAREST TO FILING DATE |
|---|---|---|
| A. TOTAL NO. COPIES (Net Press Run Plus Paid Electronic Copies) | 675 | 675 |
| B. PAID AND/OR REQUESTED CIRCULATION<br>1. Sales through dealers and carriers, street vendors, and counter sales. | 172 | 179 |
| 2. Mail Subscription (Paid and or requested) | 398 | 396 |
| 3. Paid Electronic Copies | 17 | 23 |
| C. TOTAL PAID AND/OR REQUESTED CIRCULATION (Sum of 9B1, 9B2 and 9B3.) | 587 | 598 |
| D. FREE DISTRIBUTION<br>1. BY MAIL, CARRIER OR OTHER MEANS | 30 | 30 |
| 2. SAMPLES, COMPLIMENTARY AND OTHER FREE COPIES | 0 | 0 |
| E. TOTAL DISTRIBUTION (Sum of C, D1 and D2) | 617 | 628 |
| F. COPIES NOT DISTRIBUTED<br>1. Office use, left over, unaccounted, spoiled after printing | 51 | 44 |
| 2. Return from News Agents | 24 | 26 |
| G. TOTAL (Sum of E, F1 and F2 – Should equal total shown in A.) | 675 | 675 |

**Statement must be signed by Publisher, Business Manager, or Owner in the presence of a Notary Public**
**I swear that the statements made by me are true, correct, and complete:**

Donald Ravellette
(Signature)

Owner
(Title)

State of South Dakota )
§
County of Haakon )

Sworn to before me this 29 day of Sept, 2023

Jolene Haynes
Notary Public

My commission expires: 4-3-2027

(Seal)

Form: SOS REC 051 9/2016